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## Examples of Malnutrition Billing Errors

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Here are two examples of billing errors stemming from malnutrition that caused Medicare overpayments, according to a new report from the HHS Office of Inspector General,<sup>[1]</sup> which found that hospitals had overbilled Medicare \$1 billion for two types of severe malnutrition.<sup>[2]</sup>

Example 1: Patient Had Non-Severe Malnutrition	Example 2: Patient Had Moderate Malnutrition
One claim for a patient with moderate muscle wasting and edema (Edema is defined as swelling caused by excess fluid trapped in the body’s tissues, usually in the hands, feet, or abdomen.) also included a secondary diagnosis of severe protein-calorie malnutrition. The nutritionist noted malnutrition secondary to obesity in the patient, and the physician documented non-severe protein-calorie malnutrition. The patient was placed on a heart-healthy diet and an oral protein supplement, and the patient’s diagnosis did not affect patient care. Therefore, the medical record did not support the secondary diagnosis of severe protein-calorie malnutrition. This billing error resulted in a Medicare overpayment of \$10,734.	For another claim that included a secondary diagnosis of severe protein-calorie malnutrition, the medical record documented that the patient lost 7.5% total body weight in one month, with mild loss of fat and muscle mass. The physician diagnosed the patient with moderate malnutrition, which is supported by the medical record. The patient’s moderate malnutrition diagnosis did affect the treatment plan, which involved an alternate method of feeding called total parenteral nutrition and laboratory monitoring. However, the medical record did not support the secondary diagnosis of severe protein-calorie malnutrition. This billing error resulted in a Medicare overpayment of \$3,971.

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